Under the Pepervoit Reduction Act of 1995, no persons site required to respond to a policition of Information unless it displays a yeld OMB control number. Approved for use through 7/31/2008, OMB 0651-003 Application or Dock of Humber Substitute for Form PTO-876 Effective December 8, 2004 APPLICATION AS FILED - PART I (Column 1) (Column 2) OTHER THAN SMALL ENTITY OR FOR SMALL ENTITY NUMBER FILED NUMBÉR EXTRA BASIC FEE RATE (1) FEE (\$) PT OFR 1.16(1), (b), or (c)) NA RATE (1) NIA FEE (1 SEARCH FEE NA 150.00 17 CFR 1 16/14, 11, or (m) N/A NA 300.00 NA NA **EXMINATION FEE** \$260 (1) CFR 1.16(4.6) or (4) N/A NA 1 \$500 N/A NA TOTAL CLAMES \$10a (1) OFR 1:16(1) NIA \$200 minus 20 = X\$ 25 MOEPENDENT CLAIMS X\$50 (37 OFR 1.16(N) OR minus 3. e X100 If the specification and drawings exceed 100 X200 APPLICATION SIZE sheets of paper, the application size fee due FEE (37 CFR 1.16(6)) is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s) MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(0) +180= +360× "If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL APPLICATION AS AMENDED - PART II TOTAL (Column 1) (Column 2) (Column 3) OTHER THAN CLAIMS OR SMALL ENTITY HIGHEST REMAINING SMALL ENTITY NUMBER ENDMENT PRESENT: AFTER PREVIOUSLY RATE (1) ADDI-MENDMENT EXTRA RATE (1) PAID FOR TIONAL. Total profe (Adi) -ADÓL FEE (1) Minus TIONAL X\$ 25 FEE (1 Independent DICFA LIGHT X\$50 Minus OR X100 Application Size Fee (37 CFR 1.16(s)) X200 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (3) CFR 1,160) +180= +360= OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST REMAINING NUMBER PRESENT AFTER RATE (\$) PREVIOUSLY ADDI-MENDMENT EXTRA RATE (1) PAID FOR TIONAL FEE (1) Total profit Light ADDI-Minus TIONAL FEE (\$) Independent PIOFR LIGHT X\$ 25 Minus X\$50 OR Application Size Fee (37 CFR 1.16(s)) X100 X200 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (17 CFR 1.100) +180= +360± OR TOTAL. If the entry in column 1 is less than the entry in column 2, write "O" in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". TOTAL ADD'L FEE OR ADD'L FEE

The Highest Number Previously Paid For In Itals SPACE is less man 3, enter 3.

The Highest Number Previously Paid For (Total or Independent) is the highest number (ound in the appropriate box in column 1.

Collection of Information is required by 37 OFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 OFR 1.14. This collection is estimated to take 12 minutes to complete. did gathering, preparing, and submitting the completed application form to the USPTO. Time will very depending upon the individual case. Any comments the complete the complete dapplication form to the USPTO. Time will very depending upon the individual case. Any comments the individual case and to the Chief information Officer, U.S. Patient Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS